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TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM  (to be used for all correspondence after initial filing)	Application Number	10/773,788	
	Filing Date	02/06/2004	
	First Named Inventor	ROY, Radhika R.	
	Art Unit	2419	
	Examiner Name	DUONG, Duc T.	
Total Number of Pages in This Submission	11	Attorney Docket Number	113394 CON

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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## Remarks

The Commissioner is authorized to charge any additional fee required to Deposit Account of Ronald D. Slusky, Attorney at Law, Account No. 502,186

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Office of Ronald D. Slusky Registered Patent Attorney
Signature	
Date	03/30/2009

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Ronald D. Slusky
Signature	
Date	03/30/2009

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MAR 30 2009

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT APPLICATION

Application No. : 10/773,788  
Inventor(s): Radhika R. Roy  
Filed : 02/06/2004  
Art Unit : 2419  
Examiner : Duc T. Duong  
Docket No.: 113394 CON  
Title : System and Method for Gatekeeper-to-Gatekeeper Communication

COMMISSIONER FOR PATENTS  
ALEXANDRIA, VA 22313

RESPONSE TO OFFICE ACTION

SIR:

This is in response to the Office Action mailed 03/17/2009.